

SECTION VI: FLEX FUNDS

- ☐ Flex funds should always be used as a last resort. Care Teams should make every attempt to secure funds from private insurance, Medicaid/CHIP, family, family support systems, and other Harris County service providers before using Systems of Hope Flex Funds.
- ☐ The need for using flex funds should be a team decision, be related to the improvement of the mental health status of the youth and should be listed on the youth's plan of care or annotated in an EVOLV progress note.
- ☐ The maximum flex funds that can be used per youth enrolled is \$3,000.00 with the approval of the Program Director. If additional funds are needed, the Program Director will get written permission from the HCCPS Executive Director.
- ☐ A signed release of information must be signed by the legal guardian if you will be providing confidential information about the youth/family to the vendor (i.e.- YAP, therapists or doctor, respite, etc)
- ☐ The completed flex fund form, plan of care or EVOLV progress note (must be added to plan of care after), copy of an invoice from service provider (if applicable), release form (if applicable) WV9 form and all other necessary documentation relating to the request should be submitted to the Care Team Supervisor.
- ☐ The Care Coordinator or Parent Partner will submit the complete flex fund request to a Care Team Supervisor who will process the request within one business day.

☐ PROCESS

- Checks requested for services (needed one month or more out)
 - ☐ A flex funds form with required documentation is submitted for approval.
 - ☐ The approved flex funds request is sent to accounting for processing.
 - ☐ The expense must be approved through Commissioner's Court (2-4 weeks)
 - ☐ Once Commissioner's Court approves the expense, a check can be issued. (up to one week).
 - ☐ All checks require a receipt to be submitted the administrative assistant within two business days.
 - ☐ Copies of flex funds forms should be filed in the youth's file by the administrative assistant.

☐ GIFT CARDS

- A flex funds form with required documentation is submitted for approval.
- The approved flex funds request is processed.
- The parent or guardian receiving the gift card will need to sign the flex fund receipt stating they have received the gift card by the next business day.

- If the gift card request is over \$100.00 the care team will have to accompany the parent or guardian to purchase items and submit a store receipt within two business days to the administrative assistant.
- All signed flex funds forms and receipts for gift cards are to be submitted within two business days of receipt by the care team. Receipts and signed flex fund forms are submitted to the administrative assistant for documentation.
- Copies of flex funds forms should be filed in the youth's file by the administrative assistant.
- Staff is responsible for gift cards they receive. If a gift card is lost or stolen in your care, the staff will be responsible for replacing the gift card at cash value.

☐ EMERGENCY CHECKS

- A flex funds form with required documentation is submitted for approval.
- Additionally, a CW400 form must be submitted with the flex funds form.
- The approved flex funds form and CW400 will be submitted to the Care Team Supervisor and processed.
 - ☐ Note: Instructions for check must be written on the CW400 form (call when check is ready, please mail check, etc.)
- A receipt of purchase should be submitted to the administrative assistant by the next business day.
- Copies of flex funds forms should be filed in the youth's file by the administrative assistant.

☐ FLEX FUND USES

- Families receiving services under the Harris County Systems of Hope are eligible to receive services through flexible funding that supplement their SOH services. All services paid for by flexible funding must be on the child's plan of care or annotated in an EVOLV progress note.
- Federal flex funds will pay for the following:
 - ☐ Diagnostic and evaluation services (as needed);
 - ☐ Outpatient services provided in a clinic, office, school or other appropriate location, including individual, group and family counseling services, professional consultation and review and management of medication (as needed)
 - ☐ Intensive home-based services for children and their families when the child is at imminent risk of out-of-home placement, or upon return from out-of-home placement
 - ☐ Intensive day treatment services
 - ☐ Respite care
 - ☐ Therapeutic foster care
 - ☐ Therapeutic group home service caring for not more than 10 children (i.e., services in therapeutic foster family homes or individual therapeutic residential homes)

- ☐ Assistance in making the transition from the services received as a child and youth to the services received as an adult
 - ☐ Training in all aspects of system of care development and implementation, including evidence-based interventions
 - ☐ Therapeutic recreational activities
 - ☐ Mental health services (other than residential or inpatient facilities with ten or more beds) that are determined by the individualized care team to be necessary and appropriate and to meet a critical need of the child on the child's family related to the child's serious emotional disturbance, e.g. evidence-based-practice.
- SAMHSA systems of care require that projects provide additional services to assist the child and family to the plan of care's goal. However, services cannot come from the SAMHSA federal funds. Only if these needs directly affect the youth's mental health can federal funds pay for these services.
- ☐ Emergency (24 hours):
 - Food
 - Shelter (housing)
 - Medical (not covered by Medicaid, CHIP or private insurance)
 - Transportation
 - Emergency clothing
 - Utilities
 - Telephone or limited cell phone
 - ☐ Non-Emergency
 - Food
 - Rent
 - Medical (not covered by Medicaid, CHIP or private insurance)
 - Transportation
 - Clothing
 - Respite (siblings)
 - Utilities
 - Telephone or limited cell phone
 - Family recreation
 - Education materials/school supplies
 - Furniture
 - Hygiene Items
 - Cleaning items
 - Mentoring
 - Recreation equipment

